Under the Peperwork Reduction Act of 1895, no periods on recurred to respond to a political of information under a disperse a valid Child control number. Approved for the through 10 10000 OMB ON 0003 U.S. Paleri and Irademert Office; U.S. DEPARTMENT OR COMMERCE 10/786567 Substitute for Form PTO-878 Effective December 6, 2004 APPLICATION AS FILED - PARTI. (Column 1) OTHER THAN SMALL ENTITY · (Coinn a) ÓR SMALL BHTITY FOR HUMBER FILED HUMBER EXTRA BASIC FEE BATE (\$) FREAL (37 CFR | 16(1) (6) # (6)) NA RATE (4) HIA. FÉCU. F4/A SEARCHFEE 150.00 ŇIA 300.00 (37 CFR | 16/4. 14, 00/11/1 N/A . N/A NA E XAMINATION FEE \$250 NIA \$600 (37 CFR 1 16(0), (p), or (q)) : NA N/A NA \$100 TOTAL CLAIMS MM \$200 137.CFR 1 18101 MINUS 20 . X\$ 25 INDEPENDENT CLAIMS X\$50 O# 127 CFR 1 16(N) = C wnm X100 Of besons sommand and drawings expeed 100 X200 APPLICATION SIZE sheels of paper, the application size fee due FEE . 137 CFR | 18|41 ts \$250 (\$125 for small entity) for each additional 50 sheets or frection thereof, See 35 U.S.C. 41(a)(1)(Q) and 37 CFR 1:16(s) MULTIPLE DEPENDENT CLAIM PRESENT DT CFR I 1641 +180x +360= → If the difference in column 1 is less than 2010, enler "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Calumn 1) (Column 2) (Column 3): OTHER THAN OR SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PREVIOUSLY PRESENT 106 RATE (1) AFTER **AMENDMENT** ADOI-EXTRA RATE (\$) THENDMENT ADOI: TIONAL FEE (1) TIONAL PAID FOR pi cen Line FEE (\$) Minus 2 X\$ 25 hidependent X\$50 Minus OR X100 Application Sto Fee (37 CFR 1.16(s)) X200 Ofi FRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.140) +180= +360= OR TOTAL TOTAL ADD'L FEE OR ADO'L FEE (Column 1) (Column 3) CLAIMS HIGHEST REMAINING. NUMBER PREVIOUSLY PAID FOR PRESENT RATE (1) AFTER ADDI-TIOHAL EXTRA RATE (1) MENOMENT ADOI-TIONAL FEE H CHOCK LINE FEE (1) Minus X\$ 25 tropendent . X\$50 441... Minue OR X100 X200 Application 6 tx 6 F40 (37 OFR 1.16(8)) OR first presentation of multiple dependent claim (at CFR 1.160) +180a 4860z OR TOTAL" It the entry in column 1 is less than the entry in column 2, write "of in column 3.

It is "Highest Number Previously Paid For" In THE SPACE is less than 3, enter "20".

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The "Highest Number Previously Paid For" (In This SPACE is less than 3, enter "20".

It is "Highest Number Previously Paid For" (In This SPACE is less than 3, enter "20".

It collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to the (and by the "PTO to process) an application. Confidentiality is potented by 35 U.S.O. 122 and 37 OFR 1.14. This collection is estimated to take 12 minutes to omplete, buding pathetry, preparing, and submitting the complete application form to the UPPTO. Time will vairy depending upon the individual case, any complete, the simound of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Peterni 1 Trademusik Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEHD FEES ON COMPLETED FORMS TO THIS ORBES. SEND TO Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460. TOTAL OR